

4/A
EW-1-19-01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Frank E. Joutras, et al.) Patent Application
Serial No: 09/379,851) Group Art Unit: 3764
Filed : August 24, 1999) Examiner: D. Pothier
For : EXERCISE APPARATUS) Date: January 3, 2001
AND TECHNIQUE)

AMENDMENT

Box Fee Amendment
Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

In response to the Office action mailed October 11, 2000, in the above-identified case, please amend this application as follows:

01/10/2001 WKORDMA 00000012 09379851

01 FC:203 36.00 OP

IN THE CLAIMS

Claim 3, line 1, change, "3" to - -2- -.

Claim 3, line 2, change, "member" to - - members- -.

Claim 4, line 1, change "3" to - -2- -.

Rewrite claim 2 as follows:

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TC 3700 MAIL ROOM

A1
2. (Amended) Orthotic apparatus according to claim 1 in which said friction means includes first and second friction members and [a] the means for adjusting includes control means having a program; said program controlling pressure between said first and second friction members.

FORM PTO-1083



Case Docket No. 558-9-13-1

In re application of Frank E. Joutras, et al.

Serial No. 09/379,851

Group Art Unit: 3764

Filed August 24, 1999

Examiner: D. Pothier

For EXERCISE APPARATUS AND TECHNIQUE
Box Fee Amendment
Assistant Commissioner for Patents
Washington, D.C. 20231

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Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.

☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

☐ No additional fee is required.

The fee has been calculated as shown below:

Column 1			Column 2		Column 3	Small Entity		Other Than A Small Entity	
	Claims Remaining After Amendment		Highest Number Previously Paid For	Present Extra		Rate	Additional Fee	Rate	Additional Fee
Total	* 24	Minus	** 20	= 4		x 9	\$ 36	x 18	\$
Indep.	* 3	Minus	*** 3	= 0		x 40	\$ 0	x 80	\$
<input type="checkbox"/> First presentation of multiple dependent claim						+135	\$ 0	+270	\$
						Total	\$ 36	or Total	\$

*If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.

**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

***If the "highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior amendment or the number of claims originally filed.

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FORM PTO-1083



Case Docket No. 558-9-13-1

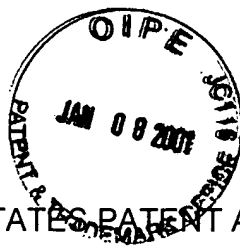
- ☐ Please charge my Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is attached.
- ☒ A check in the amount of \$ 36.00 is attached.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-0778. A duplicate copy of this sheet is attached.
- ☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR 1.17.

January 3, 2001

Date

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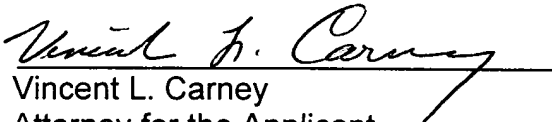


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CERTIFICATE OF MAILING

I hereby certify that this election with traverse is being deposited with the United States Postal Service as first class mail in an envelope addressed to Box Fee Amendment, Assistant Commissioner for Patents, Washington, D.C. 20231, on January 3, 2001.



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